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Counsel for Plaintiffs

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA**

**CENTER FOR BIOLOGICAL
DIVERSITY and, CENTER FOR
ENVIRONMENTAL HEALTH**

Plaintiffs,

v.

**GINA McCARTHY,
in her official capacity as
Administrator of the United States
Environmental Protection Agency,**

Defendant.

Case No. 4:16-cv-05492-TEH

**PROOF OF SERVICE OF
PROCESS**

1 I, Russell Howze, certify and declare as follows:

2 At the time of service I was at least 18 years of age and not a party to this
3 action.

4 My address is 1212 Broadway, Suite 800, Oakland, CA 94612, which is
5 located in the county where the mailing described below took place.

6 Pursuant to Federal Rule of Civil Procedure 4(i)(1)-(2), on September 30,
7 2016, I served copies of the documents described as:

8 a. COMPLAINT FOR DECLARATORY AND INJUNCTIVE
9 RELIEF;

10 b. CIVIL COVER SHEET;

11 c. PROPOSED SUMMONS;

12 d. CERTIFICATE OF INTERESTED PARTIES AND
13 CORPORATE DISCLOSURE;

14 e. ORDER SETTING INITIAL CASE MANAGEMENT
15 CONFERENCE AND ADR DEADLINES; and

16 f. SUMMONS IN A CIVIL ACTION, ISSUED TO GINA
17 McCARTHY

18 on all interested parties in this action by placing true and correct copies thereof in
19 sealed envelopes, with first-class postage prepaid thereon and with return receipts
20

1 attached, and sent the copies by certified United States Mail in Oakland,
2 California, addressed to:

3 a. Gina McCarthy, Environmental Protection Agency, Office of
4 the Administrator, 1101A, 1200 Pennsylvania Ave., NW, Washington, DC 20460;

5 b. Loretta E. Lynch, U.S. Attorney General, U.S. Department of
6 Justice, 950 Pennsylvania Avenue, NW, Washington, DC 20530-0001; and

7 c. Brian Stretch, United States Attorney, United States Attorney's
8 Office, Northern District of California, 450 Golden Gate Avenue, San Francisco,
9 CA 94102.

10 d. Civil Process Clerk, United States Attorney's Office, Northern
11 District of California, 450 Golden Gate Avenue, San Francisco, CA 94102.

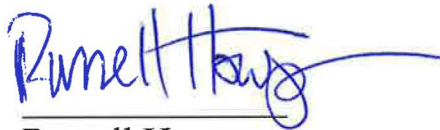
12 The return receipt for Gina McCarthy, EPA Office of the Administrator,
13 indicates that her office received the documents on October 4, 2016. The return
14 receipt for Loretta Lynch and the United States Department of Justice indicates
15 that they received the documents on October 5, 2016. The USPS tracking number
16 for the service of process documents for Brian Stretch and the U.S. Attorney's
17 Office for the Northern District of California indicate that the documents were
18 received on October 3, 2016.

19 On October 18, 2016, I served copies of this PROOF OF SERVICE OF
20 PROCESS and SUMMONS RETURN EXECUTED [Proof of Service of

1 Summons in a Civil Action] on the parties listed in paragraphs a-c above by
2 placing true and correct copies thereof in addressed sealed envelopes, with first-
3 class postage prepaid thereon in Oakland, California.

4 I, the undersigned, declare under penalty of perjury under the laws of the
5 United States of America that the foregoing is true and correct.

6 Executed on October 18, 2016, at Oakland, California.

7
8 

Russell Howze

Paralegal

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Oakland, CA 94612

Telephone: (510) 844-7100

Facsimile: (510) 844-7150

rhowze@biologicaldiversity.org

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Restricted Delivery Fee (Endorsement Required)	—
Total	7.61

Postmark
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Sent To Brian Stretch
Street, Apt. or PO Box United States Attorney
City, State, ZIP+4 U.S. Attorney's Office, N. Dist. Cal.
 450 Golden Gate Ave.
 San Francisco, CA 94102

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Restricted Delivery Fee (Endorsement Required)	—
Total	7.61

Postmark
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Sent To Loretta E. Lynch
Street, Apt. or PO Box U.S. Attorney General
City, State, ZIP+4 U.S. Dept. of Justice
 950 Pennsylvania Ave., NW
 Washington, DC 20530-0001

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Restricted Delivery Fee (Endorsement Required)	—
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 San Francisco, CA 94102

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Restricted Delivery Fee (Endorsement Required)	—
Total	7.61

Postmark
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Sent To Gina McCarthy
Street, Apt. or PO Box EPA, Office of the Administrator
City, State, ZIP+4 1101A
 1200 Pennsylvania Ave., NW
 Washington, DC 20460

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <i>Oct 05 2016</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Loretta E. Lynch U.S. Attorney General U.S. Dept. of Justice 950 Pennsylvania Ave., NW Washington, DC 20530-0001</p>		<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Registered Mail Restricted Delivery (over \$500)</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7009 2820 0004 4423 9721</p>		<p>Barcode: 9590 9402 1551 5362 5711 24</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <i>Mail Management</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Oct 5 2016</i> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Gina McCarthy EPA, Office of the Administrator 1101A 1200 Pennsylvania Ave., NW Washington, DC 20460</p>		<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7009 2820 0004 4423 9736</p>		<p>Barcode: 9590 9402 1551 5362 5711 31</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

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<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <i>16 SEP 30 PM 12:33 U.S. AT SAN FRANCISCO</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Brian Stretch United States Attorney U.S. Attorney's Office, N. Dist. Cal. 450 Golden Gate Ave. San Francisco, CA 94102</p>		<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Registered Mail Restricted Delivery (over \$500)</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7009 2820 0004 4423 9714</p>		<p>Barcode: 9590 9402 1551 5362 5711 17</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

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<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <i>16 SEP 30 PM 12:33 U.S. AT SAN FRANCISCO</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Civil Process Clerk U.S. Attorney's Office, N. Dist. Cal. 450 Golden Gate Ave. San Francisco, CA 94102</p>		<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7009 2820 0004 4423 9707</p>		<p>Barcode: 9590 9402 1551 5362 5711 00</p>	
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